

Network Infrastructure Services Agency (NISA)**LOGONID REQUEST FORM**Please forward to the address at the bottom of this page. Improper submissions will be returned. **PLEASE TYPE OR PRINT.****PART A**

1. FULL NAME _____ 2. SSN _____
(LAST) (FIRST) (MI)

3. RANK/GRADE _____ 4A. ORGANIZATION / UNIT _____

4B. OFFICE SYMBOL _____

5. OFFICE PHONE: (COMMERCIAL) (_____) DSN: _____

6. FAX PHONE: (COMMERCIAL) (_____) DSN: _____

7. STATE ANY PREVIOUS NISA LOGONIDS ISSUED: _____

PART B

I certify that I have read, understand, and will comply with the security policies and procedures described in the "User Responsibilities" section of this form. I know that any violations of these procedures by me, any unauthorized use of Government resources, or withholding knowledge of any suspected violation may result in termination of user privileges on the NISA system and submission of a report to my supervisor.

SIGNATURE _____ DATE _____

PART C - SECURITY VERIFICATION

1. I certify that _____ holds a valid clearance level of _____

Issued _____ by _____
(DD/MM/YY) (ISSUING AGENCY)

Type of investigation _____ Date completed _____

2. I have reviewed this request and certify that the applicant has need for access and has been briefed on terminal area security.

SYSTEM(S) TO ACCESS: **ATRRS** _____Security Manager _____
(TYPE / PRINT NAME) (SIGNATURE) (PHONE#)

3. REQUESTOR'S ORGANIZATION MAILING ADDRESS _____

NO ACRONYMS PLEASE ATTN: _____

(STREET ADDRESS, P.O. BOX) _____

(CITY) (STATE) (ZIP)

ISSO/COR must fax this form to: **ATRRS Help Desk ATTN: User Access**
Comm: (703) 645-0432
DSN: 224-6300

If a mailing address is needed
please send a request to:
attrshelp@hqda.army.mil

CONTRACTOR INFORMATION

1. COMPANY _____ 2. CONTRACT# _____
 3. EFFECTIVE DATE _____ 4. EXPIRATION DATE _____
 5. COR/COTR _____
 (TYPED NAME) (SIGNATURE) (PHONE)

INSTRUCTIONS**PART A**

#4. Use official organization and office symbol. Contractors must enter COTRs Office Symbol.

PART B

ALL APPLICANTS MUST READ AND SIGN.

PART C

1. Personnel must have at least a satisfactory NAC, verified by their security office.
2. You may not verify your own clearance.
3. Requestor Organization's complete address, no acronyms please. Include room and building numbers required for return mail.

ISSO/COR must fax this form to:

ATRRS Help Desk Attn:User Access
Comm: (703) 645-0432
DSN: 224-6300

If a mailing address is needed
please send a request to:
atrrshelp@hqda.army.mil

PRIVACY ACT STATEMENT

AUTHORITY: EXECUTIVE ORDER 10450.

Personal information on this form is used to determinet the individual's eligibility for access to NISA computer resources.
 Provided information is used to ensure that only authorized personnel access the computer resources.

DISCLOSURE OF INFORMATION ON THIS FORM IS VOLUNTARY. HOWEVER, IF THE INFORMATION IS NOT PROVIDED, SYSTEM ACCESS WILL BE DENIED.

USER RESPONSIBILITIES

- a. Adhere to security requirements for all remote terminals, individual passwords, and data transmitted to and from the NISA ADP Systems.
- b. Handle all information from the NISA data base containing personal privacy act information as sensitive data and comply with provisions of the Privacy Act and other published security procedures.
- c. Follow proper LOGON and LOGOFF procedures.
- d. Ensure each remote terminal is active only when an authorized terminal operator is present and using the equipment. Any violation of this procedure is a breach of security. Prior to leaving the terminal, each user must properly LOGOFF to ensure access cannot be gained without initiating proper LOGON procedures.
- e. Prevent unauthorized disclosure or transfer of systems entry features from one user to another. **DO NOT SHARE TERMINAL SESSIONS or PASSWORDS.** Violations of this will result in suspension from access.
- f. Do not transmit and/or extract classified data via unclassified remote terminals.
- g. Report suspected security violations to your supervisor and Security Manager.
- h. Do not attach privately owned equipment to the NISA computers.
- i. Fill out the NISA LogonID Request form completely, incomplete forms will be returned.
- j. Change **PASSWORDS** at least once within a 90-day period. The **PASSWORDS** are computer generated, but the process must be initiated by the user.

ATRRS Connection Survey

Please complete this form carefully. If you are not sure of an answer get assistance from someone in your office. **Erroneous information could result in not getting the software that may be required to access the ATRRS system.** Please forward this survey along with your NISA LOGON-ID request form to the address at the bottom of the NISA Form 9-R.

PLEASE TYPE OR PRINT.

PART A - ORGANIZATION INFORMATION

1. FULL NAME _____ 2. SSN _____
 (LAST) (FIRST) (MI)

3. RANK/GRADE/TITLE _____ 4A. ORGANIZATION ACRONYM _____

4B. OFFICE SYMBOL ATTN: _____

4C. ADDRESS 1 _____

4D. ADDRESS 2 _____

4E. CITY _____ 4F. STATE _____ 4G. ZIP _____

5. COMM. OFFICE PHONE: (_____) _____ DSN: _____

6. FAX OFFICE PHONE: (_____) _____ DSN: _____

PART B - SYSTEM INFORMATION

Is your ATRRS site Active Army _____ Army Reserve _____ Army National Guard _____?

If none of the above, please indicate _____

Does the computer you will be using already have ATRRS connectivity? Yes _____ No _____

Is your computer connected to a local area network (LAN)? Yes _____ No _____

Do you have Internet access? Yes _____ How _____ No _____

PART C - TSACS MODEM CONNECTIVITY

Army National Guard and Army Reserve Personnel who require modem connectivity can use, the Terminal Server Access Controller System (TSACS) to allow access to the NIPERNET. Through the NIPERNET, authorized users can connect to the Pentagon mainframe computer, and the ATRRS Website www.atrrs.army.mil via modem to access the Army Training Requirements and Resource System (ATRRS).

NOTE: Active Army Personnel must contact their Local Director of Information Management (DOIM) for a TSACS Account.

If you need a TSACS Account for ATRRS connectivity, please indicate. Yes _____ No _____

TSACS Information: TSACS Help Desk
Comm: (703) 645-8837